

# Health Advisory Summary

Today's Date:

<b>Regional Office Contact</b>	
Regional Office	<input type="checkbox"/> ERO <input type="checkbox"/> NWRO <input type="checkbox"/> SWRO
Name	
Daytime Phone Number	
After-Hours Phone Number	
<b>Water System Information</b>	
Name of System	
Operator/Owner Contact and Title	
Have they been contacted?	
Location of Water System	
County	
Where is the problem geographically located?	
How many sources does this system use?	
Type of source ( <i>surface water, GWI, groundwater</i> )	
<b>Population Information</b>	
Number of Connections	
Population Served	
Type of Population ( <i>homes, apartments, public facilities</i> )	
At-risk population	
Non-English Speaking customers	
Other factors to consider	
<b>Local Health Jurisdiction</b>	
Contact Name	
Phone Number	
Have they been contacted?	
<b>Type of Incident</b>	
What type of incident occurred? ( <i>Bacterial, chemical, vandalism, other</i> )	
Who reported the incident	
Brief description of water quality sampling activities to date	
Suspected Causes	
Any reported illnesses?	
Any calls to/from media?	
<b>Actions Being Taken To Protect Public Health</b>	

<ul style="list-style-type: none"> <li><b>Public Notice/Customer Communications:</b></li> </ul>	
Type of health advisory ( <i>Boil Water Advisory, Bottled Water, Other</i> )	
Deadline for public notification	
How/when distributed	
Contact information for customers	
Other customer recommendations	
<ul style="list-style-type: none"> <li><b>Next Steps: (What are the next steps to be taken and when?)</b></li> </ul>	
Water System	
Local Health Jurisdiction	
DOH	
<ul style="list-style-type: none"> <li><b>Overall Comments</b></li> </ul>	
Is DOH satisfied with response?	
Other comments	